



11-28-3

AF\$ 1751

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TRANSMITTAL FORM

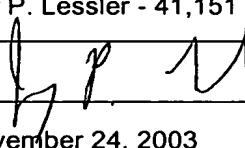
(to be used for all correspondence after initial filing)

		Application Number	10/010,711
		Filing Date	November 8, 2001
		First Named Inventor	David J. Smith
		Art Unit	1751
		Examiner Name	Eisa B. Elhilo
Total Number of Pages in This Submission	1	Attorney Docket Number	01313/100H649-US1

ENCLOSURES (Check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input checked="" type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	DARBY & DARBY P.C. Jay P. Lessler - 41,151
Signature	
Date	November 24, 2003

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PTO/SB/17 (10-03)
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FEE TRANSMITTAL

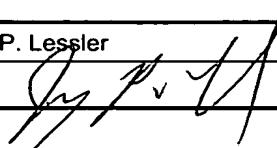
for FY 2004

Effective 10/01/2003, Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT **(\$)** **330.00**

1700 C <i>Complete if Known</i>	
Application Number	10/010,711
Filing Date	November 8, 2001
First Named Inventor	David J. Smith
Examiner Name	Eisa B. Elhilo
Art Unit	N/A
Attorney Docket No.	01313/100H649-US1

METHOD OF PAYMENT (check all that apply)				FEES CALCULATION (continued)			
<input checked="" type="checkbox"/> Check	<input type="checkbox"/> Credit Card	<input type="checkbox"/> Money Order	<input type="checkbox"/> Other	<input type="checkbox"/> None	3. ADDITIONAL FEES		
<input type="checkbox"/> Deposit Account:							
Deposit Account Number 04-0100							
Deposit Account Name Darby & Darby P.C.							
The Director is authorized to: (check all that apply)							
<input type="checkbox"/> Charge fee(s) indicated below		<input checked="" type="checkbox"/> Credit any overpayments					
<input type="checkbox"/> Charge any additional fee(s) or any underpayment of fee(s)							
<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.							
FEES CALCULATION							
1. BASIC FILING FEE							
Large Entity		Small Entity		Fee Description		Fee Paid	
Fee Code	Fee (\$)	Fee Code	Fee (\$)				
1001	770	2001	385	Utility filing fee			
1002	340	2002	170	Design filing fee			
1003	530	2003	265	Plant filing fee			
1004	770	2004	385	Reissue filing fee			
1005	160	2005	80	Provisional filing fee			
SUBTOTAL (1)		(\$)		0.00			
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE							
Large Entity		Small Entity		Fee Description		Fee Paid	
Fee Code	Fee (\$)	Fee Code	Fee (\$)				
1202	18	2202	9	Claims in excess of 20			
1201	86	2201	43	Independent claims in excess of 3			
1203	290	2203	145	Multiple dependent claim, if not paid			
1204	86	2204	43	** Reissue independent claims over original patent			
1205	18	2205	9	** Reissue claims in excess of 20 and over original patent			
SUBTOTAL (2)		(\$)		0.00			
* or number previously paid, if greater; For Reissues, see above							
(Complete if applicable)							
Name (Print/Type)	Jay P. Lessler		Registration No. (Attorney/Agent)	41,151		Telephone	(212) 527-7765
Signature						Date	November 24, 2003

*Reduced by Basic Filing Fee Paid **SUBTOTAL (3)** **(\$)** **750.00**

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